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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN **APPLICATION DATA SHEET (37 CFR 1.76)**

System & Method for Identifying Alternative Personal Contact Points

Title of Invention

As the below named inventor(s), I/we declare that:

This declaration is directed to:			
k X	The attached application, or		
. 🔲	Application No	, filed on	
, amount of Manager	as amended on	(if applica	able);
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;			
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;			
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.			
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.			
jeopardize the validity o	of the application or any patent is	suing thereon.	,
		suing thereon.	
FULL NAME OF INVEN		suing thereon.	
FULL NAME OF INVEN	NTOR(S)	suing thereon. U.S. Citizen of:	
FULL NAME OF INVEN	NTOR(S)		
FULL NAME OF INVENTAGE Inventor one: Signature:	NTOR(S)	Citizen of:	
FULL NAME OF INVEN Inventor one: Signature: Inventor two: Signature:	NTOR(S)	Citizen of:Citizen of:	
FULL NAME OF INVEN Inventor one: Signature: Inventor two: Signature:	omas R. Burke	Citizen of:Citizen of:	
FULL NAME OF INVENTAGE Inventor one: Signature: Inventor two: Signature: Inventor three: Signature:	NTOR(S) omas R. Burke	Citizen of:Citizen of:	
FULL NAME OF INVENTAGE Inventor one: Signature: Inventor two: Signature: Inventor three: Signature:	NTOR(S) omas R. Burke	Citizen of:Citizen of:Citizen of:Citizen of:Citizen of:Citizen of:Citizen of:	

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.